

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

LIBERTARIAN NATIONAL COMMITTEE, INC.

ADDRESS (number and street) ▼

2600 VIRGINIA AVE NW

SUITE 200

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20037

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00255695

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Timothy R. Hagan

Signature of Treasurer

Timothy R. Hagan

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
03 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y
03 / 31 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2013		182653.40
(b) Cash on Hand at Beginning of Reporting Period.....	244052.51	
(c) Total Receipts (from Line 19)	76811.35	284640.98
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	320863.86	467294.38
7. Total Disbursements (from Line 31)	77204.83	223635.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	243659.03	243659.03
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE, INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	3

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

20185.00

83330.00

(ii) Unitemized

56251.35

200594.27

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

76436.35

283924.27

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

76436.35

283924.27

12. Transfers From Affiliated/Other

Party Committees.....

375.00

375.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

341.71

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

76811.35

284640.98

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

76811.35

284640.98

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	76654.83	222935.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	76654.83	222935.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	550.00	700.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	550.00	700.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	77204.83	223635.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	77204.83	223635.35

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	76436.35	283924.27
34. Total Contribution Refunds (from Line 28(d))	550.00	700.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	75886.35	283224.27
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	76654.83	222935.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	341.71
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	76654.83	222593.64

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'ZG7 <98I @ 'CF' +H9A-N5H-CB

Form/Schedule: F3XN

Transaction ID :

The Committee wishes to disclose the following: 1) No expenditures designated on Schedule B supporting Line 21b were made on behalf of any specifically identified federal candidate(s). 2) The Libertarian National Committee (LNC) requests address, employer, and occupation information from all contributors whose yearly aggregate contributions exceed \$200.00 and informs them of the requirement of complying with 11 CFR 104.7(b)(1). In the event that the information is not supplied as a result of the initial request, Committee makes a subsequent attempt to collect the information by mail, email, or telephone contact within 30 days of the initial contribution. This 'follow up' request a) clearly asks for the missing information without requesting a contribution, b) informs the contributor of the requirements for reporting such information under federal law, and c) is enclosed with a pre-addressed envelope when sent by postal mail. If the information is submitted after the initial monthly report is filed, the contributor master file is updated and the information is updated in memo entries filed with the next regularly scheduled report. The Committee also makes periodic requests during the year for all contributors to update their contact information and for contributors whose yearly contributions aggregate to more than \$200 to update their Employer/Occupation information.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 61

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dr. Arnold Adicoff

Mailing Address 13952 Collier Rd

City State Zip Code
 Grass Valley CA 95945-9340

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Cardiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 01 / 2013

Transaction ID : SA11AI.96204

Amount of Each Receipt this Period

50.00

Contribution

Full Name (Last, First, Middle Initial)

B. Ms. Sharon A. Ayres

Mailing Address 4001 W 34th Ct

City State Zip Code
 Kennewick WA 99337-2695

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 22 / 2013

Transaction ID : SA11AI.96265

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

C. William Bamler

Mailing Address 2381 Port Williams Dr

City State Zip Code
 Stow OH 44224-1981

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 01 / 2013

Transaction ID : SA11AI.96293

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 61
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mario P. Barnes

Mailing Address 1636 Poppas Ferry Rd Ste 112

City State Zip Code
 Biloxi MS 39532-2214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 08 2013

Transaction ID : SA11AI.96308

Amount of Each Receipt this Period

700.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. David P. Bergland

Mailing Address 4001 W 34th Ct

City State Zip Code
 Kennewick WA 99337-2695

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 22 2013

Transaction ID : SA11AI.96364

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. John M. Bowers

Mailing Address 9418 Flanders St NE

City State Zip Code
 Minneapolis MN 55449-5638

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 27 2013

Transaction ID : SA11AI.96419

Amount of Each Receipt this Period

200.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 61

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Frank J. Bowman

Mailing Address PO Box 6324

City

Laguna Niguel

State

CA

Zip Code

92607-6324

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 01 / 2013

Transaction ID : SA11AI.96421

Amount of Each Receipt this Period

50.00

Contribution

Full Name (Last, First, Middle Initial)

B. Paul A. Brown

Mailing Address 1432 Meadowood Village Dr

City

Fort Worth

State

TX

Zip Code

76120-4701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : SA11AI.96484

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ryan Campbell

Mailing Address 3146 Hadden Hall Blvd

City

Fort Mill

State

SC

Zip Code

29715-8379

FEC ID number of contributing
federal political committee.

C

Name of Employer

Honeywell

Occupation

Commodity Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 07 / 2013

Transaction ID : SA11AI.96542

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 61

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dr. Allen E. Chantelois

Mailing Address 5555 N Meade St

City

Appleton

State

WI

Zip Code

54913-8382

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiol Assoc of the Fox Valley

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 02 / 2013

Transaction ID : SA11AI.96570

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

B. Ms. Alicia Garcia Clark

Mailing Address 437 S Orange Grove Blvd Apt 5

City

Pasadena

State

CA

Zip Code

91105-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 01 / 2013

Transaction ID : SA11AI.96586

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

C. Alan Clifton

Mailing Address 4355 Rundell Dr

City

Dayton

State

OH

Zip Code

45415-1422

FEC ID number of contributing
federal political committee.

C

Name of Employer

Netrada

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 02 / 2013

Transaction ID : SA11AI.96591

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

285.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. William Charles Collins

Mailing Address 505 Mallory Ct

City

El Paso

State

TX

Zip Code

79912-4228

FEC ID number of contributing
federal political committee.

C

Name of Employer

EPIPG/Self

Occupation

Healthcare Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 01 / 2013

Transaction ID : SA11AI.96616

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Michael W. Cook

Mailing Address 46998 Courtyard Sq

City

Sterling

State

VA

Zip Code

20164-1856

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dept of Defense

Occupation

Cartographer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 02 / 2013

Transaction ID : SA11AI.96625

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Stella M. Cove

Mailing Address 106 Princess St

City

Alexandria

State

VA

Zip Code

22314-2325

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Translator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 15 / 2013

Transaction ID : SA11AI.96645

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Michael De Mello

Mailing Address 20225 County Road 33

City

Groveland

State

FL

Zip Code

34736-9578

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Financial Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 01 / 2013

Transaction ID : SA11AI.96710

Amount of Each Receipt this Period

200.00

Contribution

Full Name (Last, First, Middle Initial)

B. John P. Evans

Mailing Address PO Box 458

City

Indianola

State

WA

Zip Code

98342-0458

FEC ID number of contributing
federal political committee.

C

Name of Employer

Solutions, IQ

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 07 / 2013

Transaction ID : SA11AI.96831

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

C. Robb C. Fleischer

Mailing Address 532 Roosevelt Way

City

San Francisco

State

CA

Zip Code

94114-1419

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

03 / 02 / 2013

Transaction ID : SA11AI.96880

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

385.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Randy Gann

Mailing Address 6335 S 72nd East Ave

City State Zip Code
Tulsa OK 74133-1122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hewlett Packard

Occupation

Computer Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 01 / 2013

Transaction ID : SA11AI.96941

Amount of Each Receipt this Period

75.00

Contribution

Full Name (Last, First, Middle Initial)

B. Peter L. Gartman

Mailing Address 101 Feather Hill Ln

City State Zip Code
Media PA 19063-5618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 06 / 2013

Transaction ID : SA11AI.96956

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

C. June R. Genis

Mailing Address 142 Rainbow Dr # 4275

City State Zip Code
Livingston TX 77399-1042

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 01 / 2013

Transaction ID : SA11AI.96968

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

660.00

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Joseph P. Gillotte

Mailing Address 8220 David Hwy

City
Lyons

State
MI

Zip Code
48851-9755

FEC ID number of contributing
federal political committee.

C

Name of Employer
Presort Services, Inc.

Occupation
Bus. Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

03 / 01 / 2013

Transaction ID : SA11AI.96997

Amount of Each Receipt this Period

120.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Frederick J. Graboske

Mailing Address 101 N Van Buren St

City
Rockville

State
MD

Zip Code
20850-1860

FEC ID number of contributing
federal political committee.

C

Name of Employer
Millican & Assoc

Occupation
Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

03 / 15 / 2013

Transaction ID : SA11AI.97026

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Rostislav Grigoriev

Mailing Address PO Box 5632

City
Stateline

State
NV

Zip Code
89449-5632

FEC ID number of contributing
federal political committee.

C

Name of Employer
Zephy Associates, Inc.

Occupation
Senior Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

03 / 02 / 2013

Transaction ID : SA11AI.97060

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

705.00

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Vince Hanke

Mailing Address 6795 Sunbriar Dr

City

Cumming

State

GA

Zip Code

30040-6589

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 26 / 2013

Transaction ID : SA11AI.97108

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Dr. Thomas F. Hastings

Mailing Address 10009 Vista Dr

City

Lenexa

State

KS

Zip Code

66220-2637

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Veterinary Pathologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 01 / 2013

Transaction ID : SA11AI.97140

Amount of Each Receipt this Period

75.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ken Heinemann

Mailing Address 3901 S Via Del Ruisenor

City

Green Valley

State

AZ

Zip Code

85622-5017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 01 / 2013

Transaction ID : SA11AI.97153

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Roberto A. Hernandez

Mailing Address 1111 Brickell Bay Dr Apt 1902

City
Miami

State
FL

Zip Code
33131-2958

FEC ID number of contributing
federal political committee.

C

Name of Employer

Brickell Bay Technologies, Inc.

Occupation

Computer Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

03 / 02 / 2013

Transaction ID : SA11AI.97174

Amount of Each Receipt this Period

85.00

Contribution

Full Name (Last, First, Middle Initial)

B. Austin Hills

Mailing Address 2546 Jackson St

City

San Francisco

State

CA

Zip Code

94115-1121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hills Exploration Corp.

Occupation

Wine Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

03 / 01 / 2013

Transaction ID : SA11AI.97188

Amount of Each Receipt this Period

60.00

Contribution

Full Name (Last, First, Middle Initial)

C. Pamela J. Hoiles

Mailing Address 527 Tunxis Hill Road

City

Fairfield

State

CT

Zip Code

06825

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 01 / 2013

Transaction ID : SA11AI.98749

Amount of Each Receipt this Period

150.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

295.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Leonard J. Karpinski

Mailing Address 2285 SW Creekside Ln

City State Zip Code
McMinnville OR 97128-8948

FEC ID number of contributing
federal political committee.

C

Name of Employer
NANA WorleyParsons

Occupation
Principal Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2013

Transaction ID : SA11AI.97375

Amount of Each Receipt this Period

30.00

Contribution

Full Name (Last, First, Middle Initial)

B. Leonard J. Karpinski

Mailing Address 2285 SW Creekside Ln

City State Zip Code
McMinnville OR 97128-8948

FEC ID number of contributing
federal political committee.

C

Name of Employer
NANA WorleyParsons

Occupation
Principal Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 11 / 2013

Transaction ID : SA11AI.97376

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

c. Larry Keilberg

Mailing Address 2749 Ryan Ave

City State Zip Code
Fort Worth TX 76110-3029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 29 / 2013

Transaction ID : SA11AI.97389

Amount of Each Receipt this Period

375.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

705.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Jeff D. Kelm

Mailing Address PO Box 567

City

Longmont

State

CO

Zip Code

80502-0567

FEC ID number of contributing
federal political committee.

C

Name of Employer

SpectraLink Corp

Occupation

Engineering Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 08 / 2013

Transaction ID : SA11AI.97402

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Kathleen M. Kelm

Mailing Address PO Box 567

City

Longmont

State

CO

Zip Code

80502-0567

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kelm Consulting

Occupation

Graphic Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2013

Transaction ID : SA11AI.97404

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. John A. Kleiner

Mailing Address 46 Greenfield Dr

City

Moraga

State

CA

Zip Code

94556-1333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2013

Transaction ID : SA11AI.97433

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Bruce K. Lagasse

Mailing Address 1029 Ringneck Way

City

Sparks

State

NV

Zip Code

89441-7815

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

03 / 12 / 2013

Transaction ID : SA11AI.97485

Amount of Each Receipt this Period

150.00

Contribution

Full Name (Last, First, Middle Initial)

B. Christopher R. Maden

Mailing Address 3126 NW 9th St

City

Gainesville

State

FL

Zip Code

32609-2167

FEC ID number of contributing
federal political committee.

C

Name of Employer

Metaweb Technologies, Inc.

Occupation

Computer programmer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

03 / 01 / 2013

Transaction ID : SA11AI.97600

Amount of Each Receipt this Period

85.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Robert B. Matthews Jr.

Mailing Address 3326 Desert Inn Dr

City

Montgomery

State

TX

Zip Code

77356-5350

FEC ID number of contributing
federal political committee.

C

Name of Employer

Horn Murdock Cole

Occupation

CPA/Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

03 / 01 / 2013

Transaction ID : SA11AI.97650

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

320.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Alexandre Matti

Mailing Address 113 Barksdale Pro Ctr ACM Consulti

City State Zip Code
Newark DE 19711

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 04 / 2013

Transaction ID : SA11AI.97651

Amount of Each Receipt this Period

85.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Stephen W. Modzelewski

Mailing Address 1578 River Rd

City State Zip Code
New Hope PA 18938-9267

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

The Watermard Group

Computer Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 01 / 2013

Transaction ID : SA11AI.97760

Amount of Each Receipt this Period

150.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Chuck Moulton

Mailing Address 4220 Hunt Club Cir Apt 811

City State Zip Code
Fairfax VA 22033-4040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Villanova Law School

Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 01 / 2013

Transaction ID : SA11AI.97791

Amount of Each Receipt this Period

100.00

Contribution

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335.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. William G. Murphey

Mailing Address 7047 S Stratton Ln

City State Zip Code
 Gurnee IL 60031-5218

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 15 / 2013

Transaction ID : SA11AI.97798

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. John D. Nash Jr.

Mailing Address 3307 Brandy Ct

City State Zip Code
 Falls Church VA 22042-3705

FEC ID number of contributing
federal political committee.

C

Name of Employer

World Bank

Occupation

Economist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 08 / 2013

Transaction ID : SA11AI.97814

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

C. Kyle-Pierre Nfr

Mailing Address 8633 W 400 N

City State Zip Code
 Michigan City IN 46360-9584

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 07 / 2013

Transaction ID : SA11AI.97838

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

685.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Frederick T. Nichols

Mailing Address 929 N Cuesta Ave

City

Tucson

State

AZ

Zip Code

85745-2312

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

03 / 02 / 2013

Transaction ID : SA11AI.97841

Amount of Each Receipt this Period

85.00

Contribution

Full Name (Last, First, Middle Initial)

B. Sean T. O'Toole

Mailing Address 3425 Gladstone Blvd

City

Kansas City

State

MO

Zip Code

64123-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Options Trading

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 02 / 2013

Transaction ID : SA11AI.97894

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Richard B. Patterson

Mailing Address 3535 Windgarden Cv

City

Memphis

State

TN

Zip Code

38125-1733

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shelby County Schools

Occupation

School Bus Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 04 / 2013

Transaction ID : SA11AI.97932

Amount of Each Receipt this Period

150.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

335.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Richard Paul

Mailing Address 432 Seaworthy Rd

City

North Fort Myers

State

FL

Zip Code

33903-4324

FEC ID number of contributing
federal political committee.

C

Name of Employer

Marine Towing & Salvage of SWFL

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

03 / 02 / 2013

Transaction ID : SA11AI.97935

Amount of Each Receipt this Period

85.00

Contribution

Full Name (Last, First, Middle Initial)

B. Bryan Pauze

Mailing Address SUSLO Unit PSC 111 #0

City

APO

State

AE

Zip Code

09454

FEC ID number of contributing
federal political committee.

C

Name of Employer

US Dept of Defense

Occupation

Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

03 / 02 / 2013

Transaction ID : SA11AI.98750

Amount of Each Receipt this Period

85.00

Contribution

Full Name (Last, First, Middle Initial)

c. Mr. Joseph H. Perry

Mailing Address 7314 Daisy St

City

Columbus

State

GA

Zip Code

31904-2606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Columbus State Univ.

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

03 / 01 / 2013

Transaction ID : SA11AI.97956

Amount of Each Receipt this Period

75.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

245.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Ms. Pamela P. Potter

Mailing Address 538 Spring Place Rd NE

City State Zip Code
 White GA 30184-2232

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 01 / 2013

Transaction ID : SA11AI.98003

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Christopher C. Robin

Mailing Address PO Box 5161

City State Zip Code
 Fairlawn OH 44334-0161

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 26 / 2013

Transaction ID : SA11AI.98107

Amount of Each Receipt this Period

65.00

Contribution

Full Name (Last, First, Middle Initial)

C. Dr. Gil Robinson

Mailing Address 5150 Broadway St # 610

City State Zip Code
 San Antonio TX 78209-5710

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self Employed

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 11 / 2013

Transaction ID : SA11AI.98108

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

815.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Ms. Susan S. Ruch

Mailing Address 5 Cuesta Ln

City State Zip Code
Santa Fe NM 87508-8331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Ranching, Real Estate Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 01 / 2013

Transaction ID : SA11AI.98139

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

B. Kyle Ryan

Mailing Address 6145 Rhonda Rd

City State Zip Code
Riverside CA 92504-1255

FEC ID number of contributing
federal political committee.

C

Name of Employer

LifeStream

Occupation

Blood Bank Laboratory Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 18 / 2013

Transaction ID : SA11AI.98159

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. James R. Schleck

Mailing Address 7108 Westover Way

City State Zip Code
Somerset NJ 08873-5912

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 02 / 2013

Transaction ID : SA11AI.98186

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1185.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Lawrence Schmidt

Mailing Address 631 D St NW Apt 232

City
Washington

State Zip Code
DC 20004-2919

FEC ID number of contributing
federal political committee.

C

Name of Employer

FutureGen Capital

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

03 / 02 / 2013

Transaction ID : SA11AI.98191

Amount of Each Receipt this Period

85.00

Contribution

Full Name (Last, First, Middle Initial)

B. Patrick-Andrew F. Shuey

Mailing Address 177 Fairfax Rd

City
Pittsburgh

State Zip Code
PA 15221-4615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Intermec

Occupation

Technical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.50

Date of Receipt

03 / 11 / 2013

Transaction ID : SA11AI.98269

Amount of Each Receipt this Period

470.00

Contribution

Full Name (Last, First, Middle Initial)

C. Patrick-Andrew F. Shuey

Mailing Address 177 Fairfax Rd

City
Pittsburgh

State Zip Code
PA 15221-4615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Intermec

Occupation

Technical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1007.50

Date of Receipt

03 / 11 / 2013

Transaction ID : SA11AI.98270

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1055.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Jeffrey S. Skinner

Mailing Address PO Box 7007

City

Northridge

State

CA

Zip Code

91327-7007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prism Management Company, Inc.

Occupation

Consulting Actuary/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 01 / 2013

Transaction ID : SA11AI.98291

Amount of Each Receipt this Period

85.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Jeffrey D. Smith

Mailing Address 665 S 13th St

City

San Jose

State

CA

Zip Code

95112-2364

FEC ID number of contributing
federal political committee.

C

Name of Employer

San Jose State Univ.

Occupation

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 22 / 2013

Transaction ID : SA11AI.98314

Amount of Each Receipt this Period

200.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Lloyd E. Smith

Mailing Address 21 Franklin Ave

City

Oswego

State

NY

Zip Code

13126-1755

FEC ID number of contributing
federal political committee.

C

Name of Employer

HYCO Tunnel & Sewer Co.

Occupation

Land Speculator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2013

Transaction ID : SA11AI.98321

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

385.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Scott Spencer

Mailing Address 424 Whitridge Ave

City
Baltimore

State
MD

Zip Code
21218-4435

FEC ID number of contributing
federal political committee.

C

Name of Employer

Johns Hopkins University

Occupation

Programmer/Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

03 / 01 / 2013

Transaction ID : SA11AI.98356

Amount of Each Receipt this Period

85.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Randy Szabla

Mailing Address 32034 W 13 Mile Rd

City

Farmington Hills

State

MI

Zip Code

48334-2000

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wayne State University

Occupation

Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

03 / 01 / 2013

Transaction ID : SA11AI.98437

Amount of Each Receipt this Period

85.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mark Szulc

Mailing Address 5201 Kingston Pike Ste 6 169

City

Knoxville

State

TN

Zip Code

37919-5011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Intelligence

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

03 / 02 / 2013

Transaction ID : SA11AI.98439

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

255.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dr. John M. Taylor, MD

Mailing Address 145 Church St

City

Fair Haven

State

NJ

Zip Code

07704-3403

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Samra Group

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

03 / 01 / 2013

Transaction ID : SA11AI.98451

Amount of Each Receipt this Period

85.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Charles D. Test

Mailing Address 2710 2nd Ave S

City

Minneapolis

State

MN

Zip Code

55408-1710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Landlord

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 01 / 2013

Transaction ID : SA11AI.98456

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Drury L. Vinton

Mailing Address PO Box 2546

City

Bandera

State

TX

Zip Code

78003-2546

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

03 / 11 / 2013

Transaction ID : SA11AI.98538

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

685.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mr. Drury L. Vinton

Mailing Address PO Box 2546

City State Zip Code
 Bandera TX 78003-2546

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 15 / 2013

Transaction ID : SA11AI.98539

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. Arch Wakefield

Mailing Address 3047 Point Clear Dr

City State Zip Code
 Tega Cay SC 29708-8542

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 01 / 2013

Transaction ID : SA11AI.98554

Amount of Each Receipt this Period

85.00

Contribution

Full Name (Last, First, Middle Initial)

C. Brian Keith Waters

Mailing Address 101 W 6th St

City State Zip Code
 Bayonne NJ 07002-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

IMTT-Pipeline

Pipeline Operator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 01 / 2013

Transaction ID : SA11AI.98583

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

420.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Jeffrey J. Weston

Mailing Address 1255 NW 9th Ave Apt 301

City

Portland

State

OR

Zip Code

97209-2887

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 01 / 2013

Transaction ID : SA11AI.98620

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mr. George R. Whitfield

Mailing Address 45107 Tarney Wood Dr

City

Portsmouth

State

VA

Zip Code

23703-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

Halcyon Search International

Occupation

Executive Search International

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 02 / 2013

Transaction ID : SA11AI.98638

Amount of Each Receipt this Period

120.00

Contribution

Full Name (Last, First, Middle Initial)

C. Matthew P. Williams

Mailing Address 74 Patrick Dr

City

Buckatunna

State

MS

Zip Code

39322-9574

FEC ID number of contributing
federal political committee.

C

Name of Employer

All Safe Technologies

Occupation

Sales/Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 02 / 2013

Transaction ID : SA11AI.98666

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

305.00

20185.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. SOUTH CAROLINA LIBERTARIAN PARTY SCLP

Mailing Address PO BOX 291383

City State Zip Code
 COLUMBIA SC 29229

FEC ID number of contributing
federal political committee.

C C00400945

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

03 / **29** / **2013**

Transaction ID : SA12.98912

Amount of Each Receipt this Period

375.00

Transfer from Affiliated Party Committee

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

375.00

375.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. American National Insurance Co.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2013

Mailing Address PO Box 1830

City	State	Zip Code
Galveston	TX	77553-1830

Transaction ID : SB21B.98755Purpose of Disbursement
LP 401k Employee Contribution and Co. Match

001

Amount of Each Disbursement this Period

Candidate Name

2309.55

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. B & B Duplicators

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2013

Mailing Address 818 18th Street NW LL15

City	State	Zip Code
Washington	DC	20006-0000

Transaction ID : SB21B.98757Purpose of Disbursement
Non Candidate Party Printing Serv

003

Amount of Each Disbursement this Period

Candidate Name

1484.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. B & B Duplicators

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2013

Mailing Address 818 18th Street NW LL15

City	State	Zip Code
Washington	DC	20006-0000

Transaction ID : SB21B.98758Purpose of Disbursement
Non Candidate Party Printing Serv

003

Amount of Each Disbursement this Period

Candidate Name

508.80

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4302.35

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Bigeye Direct, Inc.

Mailing Address PO Box 710865

City Oak Hill State VA Zip Code 20171-0865

Purpose of Disbursement
Non Candidate Party Mailing Serv

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2013
Transaction ID : SB21B.98760

Amount of Each Disbursement this Period

1106.32

Full Name (Last, First, Middle Initial)

B. Bigeye Direct, Inc.

Mailing Address PO Box 710865

City Oak Hill State VA Zip Code 20171-0865

Purpose of Disbursement
Non Candidate Party Mailing Serv

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2013
Transaction ID : SB21B.98761

Amount of Each Disbursement this Period

556.54

Full Name (Last, First, Middle Initial)

C. Broadview Networks, Inc.

Mailing Address PO Box 9242

City Uniondale State NY Zip Code 11555-9242

Purpose of Disbursement
Phone system & usage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2013
Transaction ID : SB21B.98762

Amount of Each Disbursement this Period

1066.69

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2729.55

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

Category/
Type

State: District:

Color	Number of People
Other	9.51
Blue	8.51
Green	7.51
Purple	6.51
Orange	5.51
Red	4.51

Category/
Type

State: District:

76.14

Category/
Type

State: District:

373.75

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.



69.03

Age Group	Percentage
18-24	10%
25-34	15%
35-44	20%
45-54	25%
55-64	30%
65-74	35%
75-84	40%
85+	5.09%

03 / 26 / 2013

40.70

114.82

FEC Schedule B (Form 3X) Rev. 02/2003

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 61

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Eric D. DixonMailing Address 2819 Fairhaven Ave.
Apt. 103

City Alexandria State VA Zip Code 22303-0000

Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 13 2013**Transaction ID : SB21B.98777**

Amount of Each Disbursement this Period

1338.59

Full Name (Last, First, Middle Initial)

B. Eric D. DixonMailing Address 2819 Fairhaven Ave.
Apt. 103

City Alexandria State VA Zip Code 22303-0000

Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 27 2013**Transaction ID : SB21B.98778**

Amount of Each Disbursement this Period

1338.57

Full Name (Last, First, Middle Initial)

C. Dominick J. Dunbar

Mailing Address 470 Raven Rd

City Stafford State VA Zip Code 22554-4006

Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 13 2013**Transaction ID : SB21B.98779**

Amount of Each Disbursement this Period

701.12

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3378.28

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 61

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Dominick J. Dunbar

Mailing Address 470 Raven Rd

City Stafford	State VA	Zip Code 22554-4006
------------------	-------------	------------------------

Purpose of Disbursement
Employee Net Pay

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2013

Transaction ID : SB21B.98780

Amount of Each Disbursement this Period

513.76

Full Name (Last, First, Middle Initial)

B. Paula Edwards

Mailing Address 1200 G Street, N.W. Suite 800

City Washington	State DC	Zip Code 20005-0000
--------------------	-------------	------------------------

Purpose of Disbursement
Fec Filing and Amendments

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2013

Transaction ID : SB21B.98781

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis	State MO	Zip Code 63197-0030
-------------------	-------------	------------------------

Purpose of Disbursement
Federal Unemployment

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2013

Transaction ID : SB21B.98782

Amount of Each Disbursement this Period

11.66

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2025.42

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2013

Mailing Address PO Box 970030

City	State	Zip Code
St. Louis	MO	63197-0030

Transaction ID : SB21B.98783Purpose of Disbursement
Federal Withholding

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1524.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2013

Mailing Address PO Box 970030

City	State	Zip Code
St. Louis	MO	63197-0030

Transaction ID : SB21B.98784Purpose of Disbursement
Medicare Company

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

162.92

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2013

Mailing Address PO Box 970030

City	State	Zip Code
St. Louis	MO	63197-0030

Transaction ID : SB21B.98785Purpose of Disbursement
Medicare Employee

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

162.92

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

1849.84

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis State MO Zip Code 63197-0030

Purpose of Disbursement
Social Security Company

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 12 / 2013
Transaction ID : SB21B.98786

Amount of Each Disbursement this Period

696.61

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis State MO Zip Code 63197-0030

Purpose of Disbursement
Social Security Employee

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 12 / 2013
Transaction ID : SB21B.98787

Amount of Each Disbursement this Period

696.61

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City St. Louis State MO Zip Code 63197-0030

Purpose of Disbursement
Federal Unemployment

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2013
Transaction ID : SB21B.98788

Amount of Each Disbursement this Period

3.90

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1397.12

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2013

Mailing Address PO Box 970030

City	State	Zip Code
St. Louis	MO	63197-0030

Transaction ID : SB21B.98789Purpose of Disbursement
Federal Withholding

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1524.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2013

Mailing Address PO Box 970030

City	State	Zip Code
St. Louis	MO	63197-0030

Transaction ID : SB21B.98790Purpose of Disbursement
Medicare Company

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

159.80

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Financial Agent Federal Tax Deposit

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2013

Mailing Address PO Box 970030

City	State	Zip Code
St. Louis	MO	63197-0030

Transaction ID : SB21B.98791Purpose of Disbursement
Medicare Employee

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

159.80

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1843.60

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 61

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Financial Agent Federal Tax Deposit

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2013

Mailing Address PO Box 970030

City	State	Zip Code
St. Louis	MO	63197-0030

Transaction ID : SB21B.98792Purpose of Disbursement
Social Security Company

001

Amount of Each Disbursement this Period

Candidate Name

683.29

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Full Name (Last, First, Middle Initial)

B. Financial Agent Federal Tax Deposit

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2013

Mailing Address PO Box 970030

City	State	Zip Code
St. Louis	MO	63197-0030

Transaction ID : SB21B.98793Purpose of Disbursement
Social Security Employee

001

Amount of Each Disbursement this Period

Candidate Name

683.29

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

Full Name (Last, First, Middle Initial)

C. FP Mailing Solutions

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2013

Mailing Address PO Box 4510

City	State	Zip Code
Carol Stream	IL	60197-4510

Transaction ID : SB21B.98794Purpose of Disbursement
Postage & Meter Resets

001

Amount of Each Disbursement this Period

Candidate Name

1000.00

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2366.58

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 61

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Mark Gailey

Mailing Address 105 Forest St. Apt 1

City Berea State KY Zip Code 40403-0000

Purpose of Disbursement
Ballot Access Petitioning

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2013
Transaction ID : SB21B.98796

Amount of Each Disbursement this Period

1347.50

Full Name (Last, First, Middle Initial)

B. Great American Leasing

Mailing Address PO Box 660831

City Dallas State TX Zip Code 75266-0831

Purpose of Disbursement
Post Meter Lease

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2013
Transaction ID : SB21B.98797

Amount of Each Disbursement this Period

160.99

Full Name (Last, First, Middle Initial)

C. GreenPenz2600 Virginia Ave LLC

Mailing Address PO Box 823784

City Philadelphia State PA Zip Code 19182-3784

Purpose of Disbursement
Office Rent, Tax, Maint & Utilities

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2013
Transaction ID : SB21B.98798

Amount of Each Disbursement this Period

11472.81

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12981.30

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

1019.12

State: District:

1019.12

State: District:

2302.05

State: District:

4340.29

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 61

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Carla Howell

Mailing Address 1415 N Oak St Apt 503

City

Arlington

State

VA

Zip Code

22209-3652

Purpose of Disbursement

Office Supply Reimbursement (See Memo)

001

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M /
03D D D /
27Y Y Y Y Y Y
2013**Transaction ID : SB21B.98801**

Amount of Each Disbursement this Period

74.97

Full Name (Last, First, Middle Initial)

B. OfficeDepot.com

Mailing Address PO Box 9020

City

Des Moines

State

IA

Zip Code

50368-9020

Purpose of Disbursement

Office Supplies

001

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M /
03D D D /
27Y Y Y Y Y Y
2013**Transaction ID : SB21B.98801.0**

Amount of Each Disbursement this Period

74.97

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Carla Howell

Mailing Address 1415 N Oak St Apt 503

City

Arlington

State

VA

Zip Code

22209-3652

Purpose of Disbursement

Employee Net Pay

001

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M /
03D D D /
27Y Y Y Y Y Y
2013**Transaction ID : SB21B.98804**

Amount of Each Disbursement this Period

2302.03

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2377.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

A. Internal Revenue Service

Transaction ID : SB21B.98805

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

524.03

Full Name (Last, First, Middle Initial)

B. Joe Ragan's

Date of Disbursement

Transaction ID : SB21B.98806

001

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Robert Johnston

Date of Disbursement

03 / 11 / 2013

Transaction ID : SB21B.98807

003

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional).....

2823.83

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 61

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Robert Johnston

Mailing Address PO Box 7742

City

Essex

State

MD

Zip Code

21221-0742

Purpose of Disbursement

Tele-fundraising Consulting

003

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M /

D D D /

Y Y Y Y Y Y

03

22

2013

Transaction ID : SB21B.98808

Amount of Each Disbursement this Period

2295.00

Full Name (Last, First, Middle Initial)

B. Robert S. KrausMailing Address 2500 N. Van Dorn
Apt 1608

City

Alexandria

State

VA

Zip Code

22302-0000

Purpose of Disbursement

Employee Net Pay

001

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M /

D D D /

Y Y Y Y Y Y

03

13

2013

Transaction ID : SB21B.98809

Amount of Each Disbursement this Period

1498.40

Full Name (Last, First, Middle Initial)

C. Robert S. KrausMailing Address 2500 N. Van Dorn
Apt 1608

City

Alexandria

State

VA

Zip Code

22302-0000

Purpose of Disbursement

Employee Net Pay

001

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M /

D D D /

Y Y Y Y Y Y

03

27

2013

Transaction ID : SB21B.98810

Amount of Each Disbursement this Period

1498.40

SUBTOTAL of Disbursements This Page (optional)..... ►

5291.80

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 61

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. MacBain Printing Co. Inc.

Mailing Address 1301-B Governor Ct.

City	State	Zip Code
Abington	MD	21009-0000

Purpose of Disbursement
Non Candidate Party Printing Serv

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2013

Transaction ID : SB21B.98811

Amount of Each Disbursement this Period

321.84

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address 890 Mountain Ave

City	State	Zip Code
New Providence	NJ	07974-0000

Purpose of Disbursement
Merch Processing Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2013

Transaction ID : SB21B.98812

Amount of Each Disbursement this Period

431.96

Full Name (Last, First, Middle Initial)

C. Miller's Office Products, Inc.

Mailing Address PO Box 1537

City	State	Zip Code
Newington	VA	22122-1537

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2013

Transaction ID : SB21B.98813

Amount of Each Disbursement this Period

265.20

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1019.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 61

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. PayPal Merchant Services

Mailing Address 2211 N. First St.

City	State	Zip Code
San Jose	CA	95131-0000

Purpose of Disbursement
Merch Processing Fee

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2013

Transaction ID : SB21B.98814

Amount of Each Disbursement this Period

1893.34

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address 2600 Virginia Ave NW

City	State	Zip Code
Washington	DC	20037-0000

Purpose of Disbursement
Merch Processing Fees

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2013

Transaction ID : SB21B.98815

Amount of Each Disbursement this Period

25.50

Full Name (Last, First, Middle Initial)

C. PNC Bank

Mailing Address 2600 Virginia Ave NW

City	State	Zip Code
Washington	DC	20037-0000

Purpose of Disbursement
Bank Service Charge

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2013

Transaction ID : SB21B.98816

Amount of Each Disbursement this Period

220.56

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2139.40

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. PNC Visa Card

Mailing Address P.O. Box 856176

City	State	Zip Code
Louisville	KY	40285-6176

Purpose of Disbursement
PNC Visa Card Payment (See Attached Memos)

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2013

Transaction ID : SB21B.98817

Amount of Each Disbursement this Period

9815.85

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address PO Box 582820 - MD766

City	State	Zip Code
Tulsa	OK	74158-2820

Purpose of Disbursement
Staff Travel-Air

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2013

Transaction ID : SB21B.98817.0

Amount of Each Disbursement this Period

555.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. ClearSky24, Inc.

Mailing Address 4440 Lawnview Ave.

City	State	Zip Code
Dallas	TX	75227-0000

Purpose of Disbursement
Libertarian Party Promotional Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2013

Transaction ID : SB21B.98817.2

Amount of Each Disbursement this Period

1311.37

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9815.85

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

239.83

[MEMO ITEM]

451 55

[MEMO ITEM]

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

1500.00

[MEMO ITEM]

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Age Group	Percentage
18-24	0.05
25-34	0.10
35-44	0.15
45-54	0.20
55-64	0.25
65-74	0.30
75-84	0.35
85+	0.40

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

1279.00

[MEMO ITEM]

150.00

[MEMO ITEM]

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

35.28

[MEMO ITEM]

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

A horizontal bar with a value of 0.00. The bar is light gray with a darker gray outline. It has a series of small, dark gray rectangular markers along its top and bottom edges. The value "0.00" is displayed in black text at the right end of the bar.

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 61

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address PO Box 86100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement
Staff Travel - Air

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2013
Transaction ID : SB21B.98817.22

Amount of Each Disbursement this Period

609.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Website Movers International LLC

Mailing Address 88 Kercheval Ave, Suite 100

City Grosse Pointe Farms State MI Zip Code 48236-0000

Purpose of Disbursement
Website Maintenance

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2013
Transaction ID : SB21B.98817.23

Amount of Each Disbursement this Period

1306.25

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. QuickBooks Payroll Service

Mailing Address PO Box 30015

City Reno State NV Zip Code 89520-3015

Purpose of Disbursement
Payroll Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 12 / 2013
Transaction ID : SB21B.98847

Amount of Each Disbursement this Period

113.10

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.10

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 61

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. QuickBooks Payroll Service

Mailing Address PO Box 30015

City Reno State NV Zip Code 89520-3015

Purpose of Disbursement
Payroll Processing Fees

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 26 2013
Transaction ID : SB21B.98848

Amount of Each Disbursement this Period

18.76

Full Name (Last, First, Middle Initial)

B. Molly Schwoppe

Mailing Address 12686 Catawba Dr

City Woodbridge State VA Zip Code 22192-6414

Purpose of Disbursement
Employee Net Pay

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 13 2013
Transaction ID : SB21B.98849

Amount of Each Disbursement this Period

791.20

Full Name (Last, First, Middle Initial)

C. Molly Schwoppe

Mailing Address 12686 Catawba Dr

City Woodbridge State VA Zip Code 22192-6414

Purpose of Disbursement
Employee Net Pay

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 27 2013
Transaction ID : SB21B.98850

Amount of Each Disbursement this Period

791.20

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1601.16

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

LIBERTARIAN NATIONAL COMMITTEE, INC.

3000.00

151.10

1202.67

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 61

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. United Healthcare Ins., Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2013

Mailing Address Dept. CH-10151

City	State	Zip Code
Palatine	IL	60055-0151

Transaction ID : SB21B.98855Purpose of Disbursement
Employee Health and Dental

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

2405.34

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Virginia Dept. of Taxation

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2013

Mailing Address PO Box 26644

City	State	Zip Code
Richmond	VA	23261-6644

Transaction ID : SB21B.98857Purpose of Disbursement
VA - Withholding

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

480.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Virginia Dept. of Taxation

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2013

Mailing Address PO Box 26644

City	State	Zip Code
Richmond	VA	23261-6644

Transaction ID : SB21B.98858Purpose of Disbursement
VA - Withholding

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

469.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3354.34

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 61

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Worldwide Express

Mailing Address PO Box 7624

City	State	Zip Code
Arlington	VA	22207-7624

Purpose of Disbursement
Shipping

Candidate Name

001

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2013

Transaction ID : SB21B.98859

Amount of Each Disbursement this Period

572.30

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

572.30

76389.91

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 61

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

A. Charlie Phelps

Mailing Address 3360 Green Apple Rd

City	State	Zip Code
Gainesville	GA	30506-4119

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2013

Transaction ID : SB28A.98915

Amount of Each Disbursement this Period

475.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

475.00

475.00
